Best Available Copy
Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

08755189

CLAIMS AS FILED - PART I						SMALL ENTITY			NTITY		OTHER THAN	
r	· · · · · · · · · · · · · · · · · · ·	4. Č	(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS						· 21		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		. 9			X40=		OR	X80=	
		IDENT CLAIM P						+135=		OR	+270=	
* If the difference in column 1 is less than zero,					r "0" in c	olumn 2		TOTAL		OR	TOTAL	7/801
CLAIMS AS AMENDED - PART II								-		•	OTHER	THAN
<u></u>		(Colum HIGHE			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	<del> </del>	=		X\$ 9=		OR	X\$18=	
	Independent	* NITATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CEANN			+135=		OR	+270=	
, .	and the second s						Ì	TOTAL		OB	TOTAL	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 75	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	,	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MU	JEMPLE DEP	ENDEN	CLAIM	<u> </u>	<b>,</b>	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
سنشاس		(Column 1)		(Colur		(Column 3)		NUDII. PEE		•	ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>	+135=		OR	+270=	
*  :	the entry in colur	mn 1 is less than th	e entry in colur	nn 2, write	"0" in colu	umn 3. 120. enter "20."	L	TOTAL		OR I	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												